



## Community Event Support Application

*Non -Homeowner and Civic Associations*

Complete and return to: City of Rockville, Events Specialist, 111 Maryland Ave., Rockville, MD, 20850. Applications must be received at least **5 weeks** prior to event, accompanied by a deposit of \$150.00 made payable to City of Rockville.

Name of Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: (C) \_\_\_\_\_ (H) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Event Location: \_\_\_\_\_ Address: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Time of Event: \_\_\_\_\_ Rain Date: \_\_\_\_\_

♦ Is this event a fundraiser? ☐ Yes ☐ No If yes, who is the beneficiary? \_\_\_\_\_

♦ Do you plan to charge a fee for any of the amusements? ☐ Yes ☐ No

If yes, half of the proceeds must be donated the City of Rockville Recreation Fund

♦ Will food be served? ☐ Yes ☐ No ♦ Will alcohol be served? ☐ Yes ☐ No

♦ What is you estimated attendance? \_\_\_\_\_

### City of Rockville Equipment (Check a maximum of three)

☐ Face Painting♣

☐ Lollipop Tree\*♣

☐ Sports Bag♣

☐ Parachute♣

☐ Popcorn Machine\*

☐ Sno Cone Machine\*

☐ Button Maker\*♣

\* Supplies for these amusements must be obtained by the sponsoring organization

♣ These items will need to be picked-up and dropped-off at City Hall

### Support Equipment (Maximum Available in parenthesis, indicate amount needed)

☐ Litter Boxes (4) \_\_\_\_ ☐ Cones (10) \_\_\_\_ ☐ Chairs (50) \_\_\_\_ ☐ Tables (10) \_\_\_\_

☐ Printed Flyers (500) Circle paper color: Yellow, Green, Blue, Pink

In requesting the use of equipment from the City of Rockville, the user agrees to assume full financial liability and responsibility for any damages to or loss of objects or property belonging to the City, and for any personal injury occurring during or as a result of such use, and holds the City harmless from any loss to any person or property arising from the use of City equipment. The individual signing this application on behalf of the organization has read and understands the Community Event policy and procedures, and has the authority to bind the organization, and has agreed that the organization abide by the Community Event policy and all procedures. Please note: In the event of inclement weather or other emergency, the City reserves the right to determine the operation of outdoor equipment, which may include cancellation. **Initial here:** \_\_\_\_\_

**Organization Representative Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### For Office Use only:

Approved: ☐ Yes ☐ No Initials: \_\_\_\_\_

☐ Technical Assistance Request Date: \_\_\_\_\_

☐ Special Event Work Request Date: \_\_\_\_\_

☐ Staffing: \_\_\_\_\_